

Analysis of healthy lifestyle among university students: a case study of university of Ilorin

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ABSTRACT

This study was designed to analyze healthy lifestyles among university students at the University of Ilorin, Nigeria. This is a descriptive cross-sectional study. A total of 625 students participated in this study. Data gathering was carried out from 17th November 2020 to 20th January 2021 at the University of Ilorin. The majority of respondents were females constituting 71.52%, 24.16 of the respondents were overweight and 13.12% were obese. From the analysis, it was found that there was a significant difference between the university students in the health-related disciplines and those in the non-health-related disciplines based on the health responsibility factor on the part of students. It was discovered that both categories of students have proper knowledge and observance of recommendations on healthy eating habits and physical activity. Also, the majority of the students in both categories do not attend health care educational programs. The model reveals that type of students (health-related or non-health-related), gender (male or female), academic level in the University (first year, second year, third year, and fourth year), and family dynamics (nuclear, extended) were found to be significant predictors of the healthy lifestyle among university students in the University of Ilorin, Nigeria. From the study, it was revealed that the university students were found of unhealthy living attitudes, a poor level of physical activity, and unhealthy eating habits. It is worthy to note that Universities should be the perfect model for implementing health related programs. Hence, programs that will inspire students to be more accountable for their health should be highly considered.

Keywords: Health lifestyle, Students, Healthy behavior, University of Ilorin

1. INTRODUCTION

In recent times, the frequent occurrence of transferrable and non-transferable diseases has become a global concern in the public health sector. It was predicted that by 2020, out of every ten deaths, seven deaths were caused by these diseases in developing countries (Boutayeb and Boutayeb, 2005). Additionally, it was revealed in an international publication that unending diseases are beginning to inflict the younger generation instead of being restricted to adulthood (U.S. Health in International Perspective, 2013).

Particularly, obesity is on the high increase across the globe which is quite alarming as it was predicted to be the fifth principal causal factor of death (Ezzati,

Vander, Lopez, *et al.*, 2016). It is also known to be the significant risk factor leading to other chronic issues apart from death (Nguyen, Magno, Lane, Hinojosa, and Lane, 2008), although the aftermath will be death if not well taken care of. Unhealthy eating habits and inactive living habits are among the foremost causes of the obesity epidemic (Al-Rethaiaa, Fahmy, and Al-Shwaiyat, 2010). A general measure was suggested to combat chronic health state across all age groups. This measure is targeted at achieving health-promoting lifestyles, which could consequently reduce the growing rate of disease (Boutayeb and Boutayeb, 2005).

A lifestyle is referred to as the way and dynamics of living healthy or unhealthy as it is dependent on personal behavioral choice factors. Walker, Sechrist, and Pender (1987) pointed to the fact that a healthy lifestyle is a multidimensional pattern of self-initiated and induced actions to maintain a high level of self-actualization, wellness, and fulfilment of the individual. Certain behaviors that are known to be health promoters are physical activity, health responsibility, balanced nutrition, interpersonal relations, stress management, and spiritual growth (Haddad, al-Ma'aitah, Cameron, and Armstrong-Stassen, 1998). A healthy lifestyle is pertinent in maintaining and improving health conditions (Mirghafourvand, Baheiraei, Nedjat, Mohammadi, Charandabi, and Majdzadeh, 2015).

Studies conducted in the Western and Arab regions found that young people and adolescents are not consuming the advised nutrients of vegetables and fruits. It was found that they are not eating regularly; they are consuming more fats, and not participating in some forms of physical activity (Al-Hazaa, Abahussain, Al-Sobayel, Qahwaji, and Musaiger, 2011). Also, smoking is most prevalent among the respondents particularly from aged 15 years or older, and most practiced by males (Yahia, Wang, Rapley, and Dey, 2016).

The period of university education is a critical moment that students are expected to encounter various challenges, transformations, and is mostly influenced by social, economic, political, technological, and environmental factors. It is a period whereby students adapt to a variety of circumstances (Greaney, Less, White, Dayton, Riebe, and Blissmer, 2009). In this period, university students are more prone to participate in risky health behaviors such as stress, physical inactivity, and poor dietary habits that can negatively affect their well-being (Musaiger, Awadhalla, Al-Mannai, AlSawad, and Asokan, 2017).

Several studies were carried out in Saudi Arabia and found that negative lifestyles relating to exercise and eating habits among university students (AL-Otaibi, 2013). In their study, it was revealed that exercise contributes significantly to the physical, psychological, and academic progress of students. This was corroborated in the studies of (Al-Drees, Abdulghani, Irshad, Baqays, Al-Zhrani, Alshammari, and Alturki, 2016).

Therefore, assessing the lifestyles of University students is paramount for achieving fashioned interventions of health promotion which is targeted at improving the quality of living. This study aims to reveal the determining factors and the current state of promoting healthy lifestyles among university students. Based on a literature search, this seems to be the first study to examine the difference between the university students in the health-related disciplines and those in the non-health-related disciplines regarding the health responsibility factor on the part of students at the University of Ilorin.

Assuming that students in health-related disciplines are exposed to teachings on the maintenance and realization of a healthy lifestyle, it was hypothesized in this study that university students at the health related disciplines would display a higher level of observance to healthy lifestyles than those at non-health related disciplines. The findings that emanate from this study are expected to tailor actions and efforts toward realizing robust healthy living for the ill-patient.

2. METHODS

This is a descriptive cross-sectional study. According to Zikmund (2003); Adeniran, Stephens, and Akinsehiwa (2020), the different forms of error allowances were examined to achieve a suitable sample. The error term was chosen based on the researchers' discretion. The chosen error allowance of 0.04 and Z score was employed to establish the sample size of 657 based on the equation below.

The formulae for achieving sample size $n = \frac{Z^2}{4E^2}$

It is therefore crucial that the questionnaire distribution will target six hundred and fifty-seven respondents who were University students. Primary data were collected through a convenience sampling technique. A total of 625 students participated in this study as their responses were valid for data analysis. Data gathering was carried out from 17th November 2020 to 20th January 2021 at the University of Ilorin.

The respondents completed a self-reported questionnaire which entails questions about their health-promoting attitudes and demographic characteristics. The respondents were drawn from health-related (such as medical sciences and applied medical

sciences) and non-health related disciplines (such as business and entrepreneurial related, computer, agricultural, and science-related).

3. RESULTS

Data analysis was achieved using the Statistical Package for Social Sciences (SPSS) version 21 (SPSS Inc., Chicago, IL, USA). Primary data was used to achieve descriptive statistics which comprises demographic variables and health-promoting behaviors which were reported with frequencies, mean, and standard deviation. Chi-square test was employed to determine the difference between health-related and non-health-related university students.

From table 1, findings reveal the demographic characteristics of the respondents. A total of 625 university students fully completed the surveys and their responses were considered valid for data analysis and reporting. The majority of the respondents were female representing 71.52% and were between age 20 or younger representing 56.32%.

Regarding their BMI scores, 53.12% of the respondents were considered to be of the required or normal weight, and 24.16% are overweight and 13.12% were obese. More than half of the respondents were enrolled in health-related disciplines representing 58.72%, and most of the respondents were in their first year of undergraduate study representing 47.36%. Almost all of the respondents representing 78.72% had a traditional type of family structure consisting of both of their parents, while only 21.28% are from single-parent homes.

The majority of the respondents (83.68%) resided off-campus, and only 16.32% resided in university hostels. The majority of the respondents (87.86%) do not have health issues, while 12.32% have health issues.

Regarding the health-promoting lifestyle, the mean score was also presented in Table 1. Eating habits or nutrition account for the highest mean of 21.01 ± 4.74 , followed by health-responsibility which accounted for 18.71 ± 4.65 . The mean score for physical activity behavior was lower than the mean score of the other dimensions (15.17 ± 5.21).

Table 1. Demographic characteristics of respondents

Variable	Total (N = 625)	
	N	%
Age		
Less than 20	352	56.32
21-30	199	31.84
31 and above	74	11.84
Gender		
Male	178	28.48
Female	447	71.52
BMI status		
Underweight (Below 18.5)	60	9.6
Normal weight (18.5–24.9)	332	53.12
Overweight (25.0–29.9)	151	24.16
Obese (30 and above)	82	13.12
Disciplines		
Health-related	367	58.72
Non-health related	258	41.28
College level		
First-year	296	47.36
Second-year	121	19.36
Third-year	111	17.36
Fourth-year and fifth-year	97	15.52
Family structure		
Parents	492	78.72
Single parent	133	21.28
Residence		

Off-campus	523	83.68
In-campus	102	16.32
Health problem		
Yes	77	12.32
No	548	87.68
Health Promoting Lifestyle Profile II (HPLP – II)	Mean \pm SD	Minimum score – Maximum score
Health Responsibility	18.71 \pm 4.65	9–33
Physical Activity	15.17 \pm 5.21	7–25
Nutrition /Eating Habits	21.01 \pm 4.74	8–27

Source: Authors' Fieldwork (2020)

From table 2, the factors associated with the healthy lifestyle of students at the University of Ilorin were shown. The socio-demographic factors such as age, gender, discipline, level, family structure, and Grade Point Average (GPA) of students were analyzed. The model reveals that gender, type of discipline, level, and family structure were significant predictors of the healthy lifestyle of students at the University of Ilorin, Nigeria. Also, there was no association between age, place of residence, and GPA on health responsibility, physical activity, and nutrition or diet management.

The results found that male respondents were more willing to participate in physical activity than females (*p-value: 0.041*). Nonetheless, female students had more concern in managing their nutrition and eating diet than male students (*p-value: 0.001*). Students in the health-related discipline were found to be highly conscious and responsible for their health (*p-value: 0.001*). Academic level in school was found to be a significant predictor of physical activity (*p-value: 0.001*). University students that come from a traditional family having father and mother were more willing to participate in physical activity than those from single parents (*p-value: 0.027*).

Table 2. Association of a healthy lifestyle and demographic factors of university students

Variable	Health responsibility	Physical activity	Nutrition or eating habit
	<i>P-value</i>	<i>P-value</i>	<i>P-value</i>
Age	0.516	0.490	0.340
Gender	0.301	0.041	0.001
Discipline	0.001	0.439	0.535
Level	0.871	0.001	0.636
Family structure	0.992	0.027	0.573
Place of residence	0.841	0.151	0.624
Grade Point Average	0.743	0.566	0.281

Note: *p-value significant at $p < 0.05$*

4. CONCLUSION AND RECOMMENDATIONS

University is an essential phase where students do engage themselves in risky and unsafe health behaviors that could harm their well-being, such as stress, poor dietary habits, and physical and mental inactivity. A healthy lifestyle is pertinent to maintaining and improving health conditions. This study was designed to analyze healthy lifestyles among university students at the University of Ilorin, Nigeria. This is a descriptive cross-sectional study. A total of 625 students participated in this study. Data gathering was carried out from 17th November 2020 to 20th January 2021 at the University of Ilorin.

The study found that the majority of respondents were females constituting 71.52%, 24.16 of the respondents were overweight and 13.12% were obese. From the analysis, it was found that there was a significant difference between the university students in the health-related disciplines and those in the non-health-related disciplines based on the health responsibility factor on the part of students. It was also discovered that both categories of students have proper knowledge and observance of recommendations on healthy eating habits and physical activity. Also, the majority of the students in both categories do not attend health care educational programs. The model reveals that type of students (health-related or non-health-related), gender (male or female), academic level in the University (first year, second year, third year, and fourth year), and family dynamics (nuclear, extended) were found to be significant predictors of the healthy lifestyle among university students in the University of Ilorin, Nigeria.

Furthermore, it was revealed that the university students were found of unhealthy living attitudes, with a poor level of physical activity, and unhealthy eating habits. Finally, it is worthy to note that Universities should be the perfect model for implementing health-related programs. Hence, programs that will inspire students to be more accountable for their health should be highly considered.

Conflict of interest

The authors declare that they have no conflict of interest.

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Ethical approval

This article does not contain any studies with human participants performed by any of the authors.

Data and materials availability:

All data associated with this study are present in the paper.

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